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not advocate the nurse performing services which properly belong to the physician. I was trained in a hospital where the nurses were not taught male catheterization, this always being left to the doctor or orderly. But the assumption that there must be wrong feeling on the part of the nurse when circumstances may require such duty from her, is distasteful to me in the extreme, and I feel that in the true nurse, the one who is fitted for her profession, such feeling is unknown.

As for the man's attitude, I agree heartily with "H." that "the truly womanly woman knows how to establish that little barrier of reserve which all men respect and never trespass."

Yours very truly,

E. D. S.,
Phoenix, Arizona.

AN EMERGENCY CASE

DEAR EDITOR: I see through the JOURNAL the superintendents of some of the hospitals are criticising the letters published in this department of the individual experience of nurses doing private duty. I enjoy reading them and can certainly sympathize with them. From some I get useful suggestions.

No nurse, until she has had some experience, can understand the needs of a nurse doing private duty, and I consider it essential to nurse among the lower class and very poor people, who do not even understand what the term trained nurse means, where it is necessary to undergo all kinds of inconvenience both for one's self and patient to say nothing of one's work. I have many times been in homes where the doctor would give me instruments and gloves to sterilize and could find nothing fit to boil them in.

I should like to give a personal experience I had a few weeks ago to show how entirely diverse a private nurse's work must be. I was called out at midnight, to an unexpected obstetrical case which proved to be a premature birth. I rang the bell and entered the hall, as is my custom, when I heard the doctor calling to me to come right up, and I followed the sound of his voice as quickly as I could, for the house was large and almost completely bare of furniture. I shall never forget the sight that met my eyes as I opened the door of the patient's room. She was lying on a double bed, without a sheet, on the terribly soiled mattress (with all of her clothes on, as she had been up all day, and they were very much soiled), and surrounded literally by a pool of blood. The doctor, a most excellent and tender-hearted man, was standing kneading and holding the uterus, and had been doing so for some time with no one but the husband to assist him. The patient lay down as soon as her pains started and had her husband telephone for the doctor; when he arrived the child was being born with this deluge of blood, without any severe pains. She had miscarried at six months and the placenta remained adherent to the uterus. I got things ready for the doctor to remove it, as quickly as I could; fortunately, his bag contained almost everything necessary. I had to boil the instruments in a small deep kettle into which I could not get the handles of the longer ones, but it was the only thing I could find. We could not find one single clean thing to put under the patient. She fainted at last and only then did the blood stop flowing. I had very little time for thought, but as I flew from room to room hunting for a table or chair on which to put the pan of instruments in reach of the doctor, I thought of our dear hospital, with its

tanks of sterile water, and yards of sterile gauze, and felt the intense longing for my patient for whom I wondered if recovery were possible. The room was heated only by an oil stove, which did very little good, for the night was one of the coldest I ever felt. I heated irons and put them in the patient's bed to keep her warm; the doctor removed the placenta at once and curetted the uterus, after which, of course, the blood stopped flowing.

I had been trained in a private hospital under a most excellent aseptic surgeon and taught that to do things otherwise than in a thoroughly aseptic way was criminal. I had only been out of the hospital a few months, in fact, this was my first emergency case outside, and had practically nothing with which to work. I will say for the benefit of a nurse in a similar position that I borrowed gowns and linen from very kind neighbors, covered the bed with papers and then put on the sheet, removed her clothing, and moved her to the fresh side of the bed as soon as the doctor would permit me to do so. I remained with the patient for four days without any relief, getting what rest I could while my patient slept; and then she had improved so much that, as there was no place for me to sleep, I came to my room at night, and she was up in ten days.

M. M.

SPANISH TEXT-BOOKS NEEDED

DEAR EDITOR: Can I get an answer through the JOURNAL to these questions? I would be ever so grateful to the person who will take some interest in the matter.

1. How can I obtain a text-book on practical nursing in the Spanish language for training-school use? I should be happy to find something plain and simple to understand. I have started a training school here in Lima, but I find it impossible to go on without some book. I do not speak this language fluently enough to undertake to translate a book. I have taught anatomy by using a text-book for medical students. I am anxiously looking for an answer as soon as possible.

2. How can I obtain different samples of bedside records suitable for an infants' ward? None are used at present, but I find it difficult to give the doctor a clear account of the babies, so I would like to introduce them.

BERTHA MOERI, R.N.

Lima, Peru, South America.

MRS. ROBB'S BURIAL PLACE

DEAR EDITOR: Although somewhat tardy, I should like to say just a word in the JOURNAL as to the beauty and appropriateness of Isabel Hampton Robb's resting place. I happened to be nursing in Burlington at Christmas time and was deeply impressed when the midnight chimes of historic old St. Mary's pealed out in their exquisite tones the message that Christ is Born! Surely it seemed as if the voices of all those dear ones whose bodies sleep there in the beautiful old churchyard were singing their Christmas carols too. A beautiful custom in this old parish is the singing of the "Waits" on Christmas Eve, their first carol being sung in the churchyard, where rest also the bodies of the Bishops Talbot, Doane, and Odenheimer; surely no sweeter nor more beautiful spot could have been chosen for Mrs. Robb's burial.

Even the town itself is historic, being older than Philadelphia, and the